

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00005000

2 PAGE #
1 of 22

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Ms. Kathryn

NICKNAME LAST SUFFIX
Kathie Tovo

OFFICE USE ONLY

Date Received

2014 DEC 8 PM 2:56

AUSTIN CITY CLERK RECEIVED

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

809 W 32nd Street
Austin, TX 78705

Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mr. Joseph

NICKNAME LAST SUFFIX
Pinnelli

6 CAMPAIGN TREASURER ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

P.O. Box 50038
Austin, TX 78763

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 478-5958

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)

July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year Month Day Year

10/26/2014 THROUGH 11/07/2014

10 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Runoff General Special

12/16/2014

11 OFFICE OFFICE HELD (if any)
City Council Place 3

12 OFFICE SOUGHT (if known)
City Council District 9

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Tovo, Kathrynne (Ms.)

14 ACCOUNT # (Ethics Commission filers)
00005000

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME
Better Austin Today PAC

GENERAL

COMMITTEE ADDRESS
P.O. Box 41205
Austin, TX 78704

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME
McMillan, Sandra (Ms.)

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS
2401 Euclid Avenue
Austin, TX 78704

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 8,645.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 25,463.07

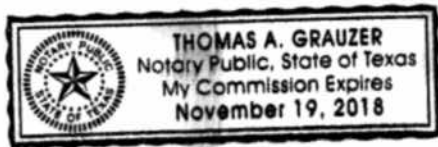
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 10,505.43

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 141,807.06

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Kathrynne B Tovo
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kathrynne B. Tovo, this the 8th day of December, 20 14, to certify which, witness my hand and seal of office.

Thomas A. Grauzer
Signature of officer administering oath

Thomas A. Grauzer
Print name of officer administering oath

notary public
Title of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)

**FORM C/OH
ADDENDUM**

Page 3 of 22

C/OH NAME Tovo, Kathrynne (Ms.)

ACCOUNT # (Ethics Commission filers)
00005000

17 NOTICE FROM POLITICAL COMMITTEE(S)

-- This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. --

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME Sierra Club Political Committee of Texas

COMMITTEE ADDRESS 615 Willow
San Antonio, TX 78202

COMMITTEE CAMPAIGN TREASURER NAME Gonzalez, Hector (Mr.)

COMMITTEE CAMPAIGN TREASURER ADDRESS 615 Willow
San Antonio, TX 78202

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/9 Report: 4/22

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date

11/04/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Armbrust, Cheryl (Ms.)

6 Contributor address; City; State; Zip Code
2807 Regents Park
Austin, TX 78746

7 Amount of
contribution (\$) |
\$25.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

11/04/2014

Full name of contributor out-of-state PAC (ID# _____)
Armbrust, David (Mr.)

Contributor address; City; State; Zip Code
2807 Regents Park
Austin, TX 78746

Amount of
contribution (\$) |
\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/26/2014

Full name of contributor out-of-state PAC (ID# _____)
Browne, James (Mr.)

Contributor address; City; State; Zip Code
1615 Pearl St
Austin, TX 78701

Amount of
contribution (\$) |
\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Professor Emeritus

Employer (See Instructions)
University of Texas

Date

10/31/2014

Full name of contributor out-of-state PAC (ID# _____)
Chernet, Tsegaye (Mr.)

Contributor address; City; State; Zip Code
P.O. Box 144542
Austin, TX 78714

Amount of
contribution (\$) |
\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Vice President

Employer (See Instructions)
ABCABCO, Inc.

Date

10/29/2014

Full name of contributor out-of-state PAC (ID# _____)
Crow, Lindsey (Ms.)

Contributor address; City; State; Zip Code
3018 West Ave.
Austin, TX 78705

Amount of
contribution (\$) |
\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/9 Report: 5/22

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date 5 Full name of contributor out-of-state PAC (ID# _____)
10/29/2014 Crow, Steven (Mr.)

6 Contributor address; City; State; Zip Code
3018 West Ave.
Austin, TX 78705

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)
\$150.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
10/31/2014 Ejigu, Daniel (Mr.)

Contributor address; City; State; Zip Code
1522 Thibodeaux
Round Rock, TX 78664

Amount of contribution (\$) In-kind contribution description (if applicable)
\$300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
IT Manager

Employer (See Instructions)
ABCABCO, Inc.

Date Full name of contributor out-of-state PAC (ID# _____)
10/31/2014 Engdaw, Teferi (Mr.)

Contributor address; City; State; Zip Code
2505 Alexander Ct
Round Rock, TX 78665

Amount of contribution (\$) In-kind contribution description (if applicable)
\$300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Taxi Driver

Employer (See Instructions)
Lone Star Cab Co.

Date Full name of contributor out-of-state PAC (ID# _____)
11/05/2014 Fath, Shudde (Ms.)

Contributor address; City; State; Zip Code
1006 Bluebonnet Ln
Austin, TX 78704

Amount of contribution (\$) In-kind contribution description (if applicable)
\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date Full name of contributor out-of-state PAC (ID# _____)
10/31/2014 Getahun, Firew (Mr.)

Contributor address; City; State; Zip Code
2722 Highpoint Dr.
Round Rock, TX 78664

Amount of contribution (\$) In-kind contribution description (if applicable)
\$300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Accountant

Employer (See Instructions)
Financial Freedom Bank

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/9 Report: 6/22	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 11/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gourd, Stuart (Mr.) 6 Contributor address; City; State; Zip Code 2204 Greenwood Ave. Austin, TX 78723	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 10/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gullahorn, Ryan (Mr.) Contributor address; City; State; Zip Code 909 W. Annie St Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 11/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawthorne, Melissa (Ms.) Contributor address; City; State; Zip Code 1403 Foxwood Cove Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Austin Permit Services, Inc			
Date 10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herndon, Dealey (Ms.) Contributor address; City; State; Zip Code 2903 Tarry Trail Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kassa, Solomon (Mr.) Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Operator		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Capital Metro			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/9 Report: 7/22	
2 FILER NAME Tovo, Kathryne (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 11/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kirk, Sandra (Ms.) 6 Contributor address; City; State; Zip Code 2117 Clifton St. Austin, TX 78704	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 11/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kuykendall, Chris (Mr.) Contributor address; City; State; Zip Code 4100 Avenue C, No 103 Austin, TX 78751	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 10/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lehman, Chris (Mr.) Contributor address; City; State; Zip Code 1914 Larchmont Dr. Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Appraiser		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) The Christopher Lehman Co.			
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mersha, Abera (Ms.) Contributor address; City; State; Zip Code 9001 Briardale Dr. Austin, TX 78758	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Taxi Driver		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Lone Star Cab Co			
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mersha, Zenaw (Mr.) Contributor address; City; State; Zip Code 9001 Briardale Dr Austin, TX 78758	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Taxi Driver		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Lone Star Cab Co.			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/9 Report: 8/22	
2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00005000	
4 Date 11/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffat, Susan (Ms.) 6 Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Editor/Writer		10 Employer (See Instructions) Self-employed	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Jesse (Mr.) Contributor address; City; State; Zip Code 1206 S. 5th St Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunton & Williams LLP	
Date 11/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mueller, Brandy (Ms.) Contributor address; City; State; Zip Code 3905 Tonkawa Trail Austin, TX 78756	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez-Wiseley, Teresa (Ms.) Contributor address; City; State; Zip Code 909 Theresa Ave Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pipe, Michael (Mr.) Contributor address; City; State; Zip Code 218 Hillcrest Ave Millheim, PA 16854	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 6/9 Report: 9/22

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date

10/28/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Radjef, Eric (Mr.)

6 Contributor address; City; State; Zip Code
2311 S. 2nd St
Austin, TX 78704

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

11/05/2014

Full name of contributor out-of-state PAC (ID# _____)
Reckson, Paula (Ms.)

Contributor address; City; State; Zip Code
1305 B Waller St
Austin, TX 78702

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/06/2014

Full name of contributor out-of-state PAC (ID# _____)
Reynolds, Caroline (Mrs.)

Contributor address; City; State; Zip Code
2611 W 49th St
Austin, TX 78731

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

11/06/2014

Full name of contributor out-of-state PAC (ID# _____)
Reynolds, Joseph (Mr.)

Contributor address; City; State; Zip Code
2611 W 49th St
Austin, TX 78731

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date

11/05/2014

Full name of contributor out-of-state PAC (ID# _____)
Sanger, Mary (Ms.)

Contributor address; City; State; Zip Code
704 Carolyn Ave.
Austin, TX 78705

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 7/9 Report: 10/22

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
10/30/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Santis, Rosa (Ms.)

6 Contributor address; City; State; Zip Code
2311 Enfield Dr
Austin, TX 78703

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)
\$300.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
President/CEO

10 Employer (See Instructions)
Perdro SS Services

Date
11/07/2014

Full name of contributor out-of-state PAC (ID# _____)
Searcy, Judith (Ms.)

Contributor address; City; State; Zip Code
821 Harris Avenue
Austin, TX 78705

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/31/2014

Full name of contributor out-of-state PAC (ID# _____)
Seifu, Yemane (Mr.)

Contributor address; City; State; Zip Code
1015 Yager Ln, #92
Austin, TX 78753

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
N/A

Date
11/05/2014

Full name of contributor out-of-state PAC (ID# _____)
Smolen, Paul (Mr.)

Contributor address; City; State; Zip Code
3812 Cherrywood Rd
Austin, TX 78722

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
11/07/2014

Full name of contributor out-of-state PAC (ID# _____)
Suttle, Alison (Ms.)

Contributor address; City; State; Zip Code
100 Congress Ave Suite 1300
Austin, TX 78701

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 8/9 Report: 11/22

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00005000

4 Date

11/07/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Suttle, Richard (Mr.)

6 Contributor address; City; State; Zip Code
100 Congress Ave Suite 1300
Austin, TX 78701

7 Amount of contribution (\$)

\$25.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/29/2014

Full name of contributor out-of-state PAC (ID# _____)
Tabrizi, Dona Avery (Ms.)

Contributor address; City; State; Zip Code
1102 Claire Ave
Austin, TX 78703

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/04/2014

Full name of contributor out-of-state PAC (ID# _____)
Taylor, Timothy (Mr.)

Contributor address; City; State; Zip Code
1902 Stamford Lane
Austin, TX 78703

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Jackson Walker LLP

Date

10/31/2014

Full name of contributor out-of-state PAC (ID# _____)
Tekle, Yodit (Ms.)

Contributor address; City; State; Zip Code
2958 Donnell Dr
Round Rock, TX 78664

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Contractor

Employer (See Instructions)
YAA Transportation

Date

11/05/2014

Full name of contributor out-of-state PAC (ID# _____)
Waugh, Gene (Ms.)

Contributor address; City; State; Zip Code
608 Harthan St
Austin, TX 78703

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 9/9 Report: 12/22

2 FILER NAME Tovo, Kathryn (Ms.)

3 ACCOUNT # (Ethics Commission filers)
00005000

4 Date
10/26/2014

5 Full name of contributor out-of-state PAC (ID# _____)
Werbner, Stuart (Mr.)

6 Contributor address; City; State; Zip Code
2118 Glendale Place
Austin, TX 78704

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)
\$50.00 |

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
11/02/2014

Full name of contributor out-of-state PAC (ID# _____)
Whitlow, Elizabeth (Ms.)

Contributor address; City; State; Zip Code
1509 A Parkway
Austin, TX 78703

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$25.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/31/2014

Full name of contributor out-of-state PAC (ID# _____)
Yedeme, Tigabu (Mr.)

Contributor address; City; State; Zip Code
941 Hesters Crossing Rd 2702
Round Rock, TX 78681

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$300.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Taxi Driver

Employer (See Instructions)
Lone Star Cab Co.

Date
10/31/2014

Full name of contributor out-of-state PAC (ID# _____)
Yosief, Eyeyu (Ms.)

Contributor address; City; State; Zip Code
13608 Mereseyside Dr.
Pflugerville, TX 78660

Amount of contribution (\$) | In-kind contribution description (if applicable)
\$300.00 |

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Taxi Driver

Employer (See Instructions)
Lone Star Cab Co.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/10 Report: 13/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 10/28/2014	5 Payee name Atkins, Jesse (Mr.)				
6 Amount (\$) \$253.00	7 Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/01/2014	Payee name Atkins, Jesse (Mr.)				
Amount (\$) \$308.00	Payee address City; State; Zip Code 1914 Patton Ln Austin, TX 78723				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/01/2014	Payee name Dahl-Stamnes, Erika (Ms.)				
Amount (\$) \$966.00	Payee address City; State; Zip Code 10900 Research Blvd #1600 Austin, TX 78759				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/01/2014	Payee name De Los Santos, Drew (Ms.)				
Amount (\$) \$1,450.00	Payee address City; State; Zip Code 2601 Parker Ln Unit A Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/10 Report: 14/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 10/27/2014		5 Payee name Dobie Parking Garage			
6 Amount (\$) \$9.00		7 Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/27/2014		Payee name Dobie Parking Garage			
Amount (\$) \$6.00		Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/28/2014		Payee name Dobie Parking Garage			
Amount (\$) \$12.00		Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/29/2014		Payee name Dobie Parking Garage			
Amount (\$) \$20.00		Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/10 Report: 15/22		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 10/30/2014		5 Payee name Dobie Parking Garage			
6 Amount (\$) \$20.00		7 Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2014		Payee name Dobie Parking Garage			
Amount (\$) \$15.00		Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/03/2014		Payee name Dobie Parking Garage			
Amount (\$) \$12.00		Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/04/2014		Payee name Dobie Parking Garage			
Amount (\$) \$20.00		Payee address City; State; Zip Code 2021 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking for campaign worker <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/10 Report: 16/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 10/29/2014		5 Payee name Facebook, Inc.			
6 Amount (\$) \$26.50		7 Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2014		Payee name Facebook, Inc.			
Amount (\$) \$38.81		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/31/2014		Payee name Facebook, Inc.			
Amount (\$) \$18.22		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/01/2014		Payee name Forsythe, Chandler (Mr.)			
Amount (\$) \$264.00		Payee address City; State; Zip Code 201 E. 21st W0305 Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/10 Report: 17/22	2 FILER NAME Tovo, Kathrynne (Ms.)	3 ACCOUNT # (TEC filers) 00005000
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4 Date 11/01/2014	5 Payee name Griffith Descendants, LLC	
6 Amount (\$) \$2,780.00	7 Payee address City; State; Zip Code 3536 Bee Caves Rd #310 Austin, TX 78746	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Office Rent
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2014	Payee name Haule, Margaret (Ms.)	
Amount (\$) \$300.00	Payee address City; State; Zip Code 3405 Texas Topaz Dr. Austin, TX 78728	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/02/2014	Payee name Haule, Margaret (Ms.)	
Amount (\$) \$120.00	Payee address City; State; Zip Code 3405 Texas Topaz Dr. Austin, TX 78728	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 11/01/2014	Payee name Hughes, William (Mr.)	
Amount (\$) \$1,650.00	Payee address City; State; Zip Code 1009 Hillside Oaks Dr. Austin, TX 78745	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/10 Report: 18/22		2 FILER NAME Tovo, Kathryn (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 11/01/2014		5 Payee name Kiolbassa, Jolene (Ms.)			
6 Amount (\$) \$1,250.00		7 Payee address City: State; Zip Code 3007 West Ave Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/01/2014		Payee name Lines, Travis (Mr.)			
Amount (\$) \$704.00		Payee address City: State; Zip Code 3701 Turtlecreek Blvd Apt 9F Dallas, TX 75219			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/01/2014		Payee name Minguell, Tomas (Mr.)			
Amount (\$) \$300.00		Payee address City: State; Zip Code 2614 Canterbury Austin, TX 78759			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor for campaign services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/27/2014		Payee name Office Max			
Amount (\$) \$67.93		Payee address City: State; Zip Code 4615 North Lamar Blvd Austin, TX 78756			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies for sign making <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/10 Report: 19/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 11/02/2014		5 Payee name OfficeMax			
6 Amount (\$) \$56.77		7 Payee address City; State; Zip Code 907 W 5th Street Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies for sign making <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/30/2014		Payee name Piryx, Inc.			
Amount (\$) \$29.00		Payee address City; State; Zip Code 144 2nd St. 1st floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Management process fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/07/2014		Payee name Piryx, Inc.			
Amount (\$) \$218.28		Payee address City; State; Zip Code 144 2nd St. 1st floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cumulative online processing fees for reporting period <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/26/2014		Payee name Rindy & Associates, Inc.			
Amount (\$) \$10,300.00		Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/10 Report: 20/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 10/27/2014		5 Payee name Rindy & Associates, Inc.			
6 Amount (\$) \$1,898.00		7 Payee address City; State; Zip Code 2401 East 6th Street #1003 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/04/2014		Payee name Scholz Garten			
Amount (\$) \$300.54		Payee address City; State; Zip Code 1607 San Jacinto Blvd Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Watch party venue rental and food <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/29/2014		Payee name Smartmail			
Amount (\$) \$482.03		Payee address City; State; Zip Code 2011 Anchor Lane Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Advertising - postage and mailing services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/01/2014		Payee name Taco Shack			
Amount (\$) \$23.25		Payee address City; State; Zip Code 2825 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Breakfast for campaign workers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/10 Report: 21/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 10/30/2014		5 Payee name The Maids			
6 Amount (\$) \$94.18		7 Payee address City; State; Zip Code 8514 Cameron Rd Austin, TX 78754			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office cleaning <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/28/2014		Payee name Worley Printing Co, Inc.			
Amount (\$) \$102.84		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/29/2014		Payee name Worley Printing Co, Inc.			
Amount (\$) \$128.82		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/30/2014		Payee name Worley Printing Co, Inc.			
Amount (\$) \$424.34		Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/10 Report: 22/22		2 FILER NAME Tovo, Kathrynne (Ms.)		3 ACCOUNT # (TEC filers) 00005000	
4 Date 11/03/2014	5 Payee name Worley Printing Co, Inc.				
6 Amount (\$) \$397.28	7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 11/03/2014	Payee name Worley Printing Co, Inc.				
Amount (\$) \$397.28	Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Flyer Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

**AUSTIN CITY CLERK
 BUNDLING REPORT RECEIVED**

Name of candidate/officeholder: Kathryn Tovo

2014 DEC 8 PM 2 56

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Solomon Kassa	2958 Donnell Dr, Round Rock, TX 78664	Operator	Capital Metro	3500

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Name of Contributor	Address	Occupation	Employer	Contribution Amount	Bundler
Tsegaye Chernet	P.O. Box 144542, Austin, TX 78714	Vice President	ABCABCO, Inc	\$350	Solomon Kassa
Daniel Mesfin Ejigu	1522 Thibodeaux Dr., Round Rock, TX 78664	IT Manager	ABCABCO, Inc	\$300	Solomon Kassa
Teferi Engdaw	2505 Alexander Ct, Round Rock, TX 78665	Taxi Driver	Lone Star Cab Co	\$300	Solomon Kassa
Firew Getahun	2722 High Point Dr., Round Rock, TX 78664	Accountant	Freedom Financial	\$300	Solomon Kassa
Abera Mersha	9001 Briardale Dr., Austin, TX 78758	Taxi Driver	Lone Star Cab Co	\$300	Solomon Kassa
Zenaw Mersha	9001 Briardale Dr., Austin, TX 78758	Taxi Driver	Lone Star Cab Co	\$350	Solomon Kassa
Yemane Seifu	1015 E. Yager Ln. Unit 92, Austin, TX 78753	Retired	N/A	\$300	Solomon Kassa
Eyeyu Yosief	13608 Mereseyaside Dr., Plugerville, TX 78660	Taxi Driver	Lone Star Cab Co	\$300	Solomon Kassa
Yodit Tekle	2958 Donnell Dr., Round Rock, TX 78664	Contractor	YAA Transportation	\$350	Solomon Kassa
Tigabu Yedeme	941 Hesters Crossing Rd 2702, Round Rock, TX 78681	Taxi Driver	Lone Star Cab Co	\$300	Solomon Kassa
Solomon Kassa	2958 Donnell Dr., Round Rock, TX 78664	Operator	Capital Metro	\$350	Solomon Kassa

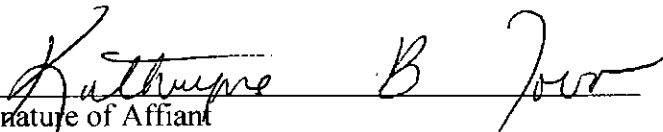
3. Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2) a business association through which the Bundler does business, or (3) the Bundler's employer.

None

Note: It is important to remember that contributions to you are from the actual donor, not from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.

**STATE OF TEXAS
VERIFICATION**

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.


Signature of Affiant